

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

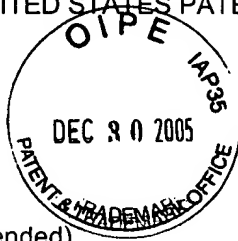
Masao TAKEUCHI, et al.

Serial No: 09/602,814

Confirmation No.: 9608

Filed: June 23, 2000

For: Ball Loading Apparatus (amended)



Art Unit: 1725

Examiner: Kerns, Kevin P.

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:  
 Mail Stop Amendment  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450, on  
 December 27, 2005

Date of Deposit

Name

Juanita Soberanis

Signature

12/27/2005

Date

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted in the above-identified application are the following items:

- ☒ Amendment.  
☒ Return postcard.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	4	-	20	**	0	LG=\$50 SM=\$25 \$ 0
INDEPENDENT CLAIMS FEE	1	-	3	***	0	LG=\$200 SM=\$100 \$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)					\$250 FOR EACH ADDITIONAL 50 SHEETS	\$ 0
TOTAL						\$ 0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$ 0 to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
 HOGAN & HARTSON L.L.P.

Date: December 27, 2005

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Appl. No. 09/602,814  
Amdt. dated December 27, 2005  
Reply to Office Action of September 27, 2005

Atty. Ref. 82493.0002  
Customer No. 26021

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**AMENDMENT**

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December 27, 2005

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Juanita Soberanis

Name

Juanita Soberanis 12/27/2005  
Signature Date

Dear Sir:

In response to the Office Action dated September 27, 2005, please amend this application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.